## **SHOP Marketplace Appeals**

If you're a small business owner that applied for coverage in the Small Business Health Options Program (SHOP) Marketplace, you have the right to appeal SHOP decisions in 2 cases:

- 1. You've received a notice that denies you SHOP eligibility.
- 2. The SHOP Marketplace hasn't made a SHOP eligibility determination in a timely manner.

If you're not eligible to participate in the SHOP Marketplace, you'll receive a notice with instructions on how to appeal. You have 90 days from the date in the notice to request an appeal.

If your state is running its own SHOP, the appeals processes may be different. Please refer to your state's SHOP for more details. Visit <u>HealthCare.gov/marketplace/shop/</u> to find the SHOP Marketplace that serves you.

## How to submit an appeal for SHOP Marketplace eligibility

You file a SHOP appeal by writing your own letter of appeal. The letter should include your name and address, a phone number where you or your authorized representative can be reached, and the reason you believe your eligibility determination is wrong.

SHOP Marketplace appeals should be mailed to the following address:

Health Insurance Marketplace 465 Industrial Boulevard London, KY 40750-0061

You may also file an appeal by contacting the SHOP Small Employer Call Center at 1-800-706-7893. TTY users should call 711 to access the SHOP Call Center. The hours are Monday through Friday, 9 a.m. to 7 p.m. ET. Agents and brokers may also use this number.

